# 05/02/2014 **Updates from the MT Laboratory Services Bureau** 800-821-7284

www.lab.hhs.mt.gov

## CAP LPX Survey Set A rule-out specimens received by MTPHL

The CAP LPX survey Set A specimens that were sent to the MTPHL for BT rule-out have arrived. Once we receive the survey results from CAP, we will email an exercise After Action Report to all the participating laboratories.

For those of you who do not currently participate in the CAP LPX surveys, there is still time to register for the 2014 CAP LPX Set B, which will be sent out in September.

MTPHL encourages all qualified microbiology laboratories, especially those recognized as sentinel laboratories, to participate in the CAP LPX surveys. Challenges are shipped twice a year and give sentinel laboratorians an opportunity for hands on use of the ASM guidelines for rule-out testing. Referral of cultures that cannot be ruled out gives laboratories an opportunity to exercise proper MTPHL notification procedures and proper packaging and shipping procedures. The cost of the survey will be reimbursed, by request, by MTPHL. If you are interesting and would like more information please contact Lana Moyer, Imoyer@mt.gov or Crystal Poppler, cpoppler@mt.gov, or call 800-821-7284.

# Survey on Chlamydia and Gonorrhea testing practices

On March 14, 2014, updated guidelines on Recommendations for the Laboratory-Based Detection of Chlamydia trachomatis and Neisseria gonorrhoeae — 2014 were published in MMWR Recommendations and Reports. Highlights include recommendations that nucleic acid amplification tests (NAATs) be used to detect cases of chlamydial or gonococcal infections, that vaginal specimens are optimal for women, and that NAATs should be used to detect rectal and oropharyngeal infections.

In an effort to monitor the impact of the guidelines on current clinical laboratory practices for *C. trachomatis* and *N. gonorrhoeae*, the Association of Public Health Laboratories (APHL) and Centers for Disease Control and Prevention (CDC) Division of STD Prevention (DSTDP) is fielding a survey to collect 2013 baseline data, to capture practices prior to the release of the guidelines. A follow-up survey in 18 months will document any changes in laboratory practices as a result of these newly published guidelines.

Clinical laboratories should have received a link to the survey via e-mail on Friday April 25, originating from Susie Zanto at the MTPHL. The link was sent to only one person at each facility, so if you did not receive it directly, you may need to check with your Laboratory Manager. Please complete this survey by close of business May 8, 2014. The survey is short and limited to 16 questions. If you have any questions, please contact

Stephanie Chester, stephanie.chester@aphl.org or 240.485.2740.

# Tools for *Neisseria*gonorrhoeae culture and susceptibility testing

Because there are limited treatment options for N. gonorrhoeae, there is a critical need for accurate antimicrobial resistance testing to prevent possible treatment failures. Most screening for GC performed using non-culture technologies, but there are occasions when culture is necessary, and transport to a laboratory that performs GC culture can be problematic. The APHL STD Subcommittee recently published a GC Transport Fact Sheet that describes suitable transport systems for transporting N. gonorrhoeae specimens for culture. The fact sheet highlights available performance data and outlines the benefits and limitations of each system.

Another resource for GC susceptibility testing is an <u>educational video</u> which provides an overview of the proper set up and interpretation of the Etest® method for antimicrobial susceptibility testing for *Neisseria gonorrhoeae*.

Please take a few minutes to review these resources, and if you have any feedback, please contact Susie Zanto, APHL STD Subcommittee Chair, at 800-821-728.

### Montana Communicable Disease Weekly Update

Release date: 5/2/2014

### **DISEASE INFORMATION**



<u>Summary – MMWR Week 17 - Ending 4/26/2014</u> Preliminary disease reports received at DPHHS during the reporting period April 20–26, 2014 included the following:

- Vaccine Preventable Diseases: Influenza hospitalization (1), Pertussis (14), Varicella (5)
- Invasive Diseases: (0)
- Enteric Diseases: Campylobacteriosis (5), Giardiasis (2), Shiga-toxin producing E. coli (1)
- **Hepatitis:** Hepatitis A (1)
- **HIV Disease**\*\*: (0)
- Vector-borne Diseases: Tularemia (1)
- Animal Rabies: (0)
- Travel Related Conditions: Coccidioidomycosis (1), Dengue Fever (1)

NOTE: The attached reports have multiple pages reflecting the following information: (1) cases for the past reporting week; (2) communicable diseases YTD; (3) clusters and outbreaks; and (4) a quarterly HIV/STD summary.

### **HOT TOPICS**

One MERS CoV Case In The U.S. (NONE in Montana): As noted, there is <u>no</u> impact on Montana to date. This first case reported in the U.S. was reported out of Indiana. This was to be expected over time. CDC and Indiana Public Health are on it. CDC has told what information they have with the linked press release below.

http://www.cdc.gov/media/releases/2014/p0502-US-MERS.html

Rabies, Ticks and West Nile Virus (Oh My): See the new DPHHS website on ticks including resources you can use at <a href="http://www.dphhs.mt.gov/publichealth/ticks/index.shtml">http://www.dphhs.mt.gov/publichealth/ticks/index.shtml</a> DPHHS also did a press release on the 18<sup>th</sup> and that can be found at <a href="http://www.dphhs.mt.gov/newsevents/newsreleases2014/april/ticks.shtml">http://www.dphhs.mt.gov/newsevents/newsreleases2014/april/ticks.shtml</a>

• There will not be WNV pamphlets available this year due to funding cuts – use your educational materials sparingly OR plan on ordering some materials using available funds at your health department.

**Hantavirus Prevention:** Now that the weather is warming up, residents have started their spring cleaning. A DPHHS press release on this went out last week and it is front and center on our web site at <a href="http://www.dphhs.mt.gov/">http://www.dphhs.mt.gov/</a>

Key messages:

To minimize potential exposures to this deadly virus Montanans need to be reminded of three things:

- ✓ Seal Up! Seal up holes inside and outside the structure to keep rodents out.
- ✓ Trap Up! Trap rodents around the buildings to help reduce the population
- ✓ Clean Up! Avoid illness: Take precautions before and while cleaning rodent-infested areas.

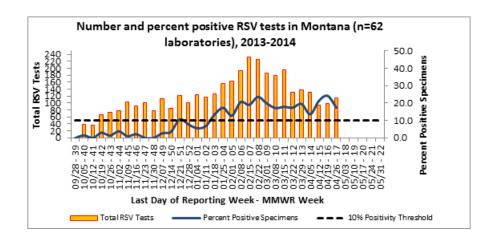
 $<sup>\</sup>mathring{}$  Weekly updated Montana Influenza Summary is included as link in the Influenza section of this update.

<sup>\*\*</sup> A case is included if a new confirmatory test or report was received by DPHHS. Cases include both persons who were newly diagnosed and persons newly reported in Montana who may have been diagnosed in another state or country.

Additional resources on preventing hantavirus infections can be found at the Centers for Disease Control and Prevention's website at <a href="http://www.cdc.gov/hantavirus/hps/prevention.html">http://www.cdc.gov/hantavirus/hps/prevention.html</a> or the DPHHS website <a href="http://www.dphhs.mt.gov/publichealth/cdepi/">http://www.dphhs.mt.gov/publichealth/cdepi/</a>.

**Respiratory Syncytial Virus (RSV):** Weekly updates and additional RSV and RSV prophylaxis information can be found at www.rsv.mt.gov.

- There was a 7% increase in the RSV positivity rate this week, however, the percentage of labs reporting plummeted! Less than half of the labs reported in the most recent week.
- As part of your active surveillance, Contact labs in your jurisdiction let them know that reporting is not
  voluntary and that they should be reporting ALL negatives and positives. We appear to still be at high levels
  but the failure to report by over half of the labs is making any conclusions impossible to make at this point.
- If you have any questions on reporting labs in your area or the labs have any questions regarding how to report to our system, contact CDEpi at 406-444-0273.
- RSV reporting for the 2013-2014 season will end June 1, 2014.



**2013-2014 Influenza Season:** The current <u>FluView</u> report indicates that seasonal influenza activity is low and declining across most of the country, though flu viruses continue to circulate and cause illness in the United States. Montana is presently "sporadic" in cases reported.

- This week influenza B viruses account for 55% of viruses nationally and are causing an increase in influenza-like-illness in parts of the northeast especially.
- It is not uncommon for there to be a second wave of flu activity caused by another seasonal virus later in the flu season.

The most recent issue of the Montana Influenza Summary is available at: <a href="http://www.dphhs.mt.gov/influenza/influenzaactivity.shtml">http://www.dphhs.mt.gov/influenza/influenzaactivity.shtml</a>

### **INFORMATION/ANNOUNCEMENTS**

**Investigation Guidelines:** We are finalizing investigation guidelines and the most recent, Tularemia, is presently being used and reviewed for a case. Expect to see Lyme, West Nile (arboviral disease), Campylobacteriosis, lead and Q-fever soon. You too can go find them and resources on the contractors sharepoint site under the CDEpi tab and left hand menu CDEpi Technical Guidance (Diseases A to Z). Folders that are empty are indicated as such others have resources and we are populating the investigation guidelines as soon as we can get them done. If you end up using them, please give us feedback for improvement.

### **24/7 AVAILABILITY**

The Communicable Disease Epidemiology (CDEpi) Program is available 24 hours a day, 7 days a week, 365 days a year, to assist local health jurisdictions. Local providers should call, including after normal business hours, their local health jurisdiction. The CDEpi 24-hour line is available as a back-up to the local health jurisdiction's 24-hour line. If you need CDEpi assistance, please call 406.444.0273. Phone calls to this number outside of normal business hours will be answered by the answering service. The answering service will immediately forward the message to CDEpi, and we will respond as quickly as possible.

Local health jurisdictions, please ensure that your local providers have your 24/7/365 contact information. And please inform CDEpi or the Public Health Emergency Preparedness Program of updates to your required 24/7 contact information.

This update is produced by the Montana Communicable Disease Epidemiology Program. Questions regarding its content should be directed to 406.444.0273 (24/7/365). For more information: <a href="http://cdepi.hhs.mt.gov">http://cdepi.hhs.mt.gov</a>